

Fill in this information to identify your case:

Debtor 1 Maurice Gindraw

Debtor 2 Geneva Jefferson-Gindraw
(Spouse, if filing)

United States Bankruptcy Court for the: EASTERN DISTRICT OF PENNSYLVANIA

Case number 18-14344
(If known)

Check if this is:

- ☒ An amended filing
- ☐ A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employment status

Occupation

Employer's name

Employer's address

How long employed there?

Debtor 1

- ☒ Employed
- ☐ Not employed

Meter Tech

Grid One Solutions

700 Turner Way, Ste. 205
Aston, PA 19014

21 years

Debtor 2 or non-filing spouse

- ☒ Employed
- ☐ Not employed

Housekeeping

University of Pennsylvania
Hospital

3400 Spruce Street
Philadelphia, PA 19104

19 years

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

3. Estimate and list monthly overtime pay.

4. Calculate gross income. Add line 2 + line 3.

For Debtor 1

For Debtor 2 or non-filing spouse

2. \$ 4,788.33 \$ 3,066.77

3. +\$ 0.00 +\$ 0.00

4. \$ 4,788.33 \$ 3,066.77

Debtor 1 **Maurice Gindraw**
Debtor 2 **Geneva Jefferson-Gindraw**

Case number (if known) **18-14344**

Copy line 4 here

	For Debtor 1	For Debtor 2 or non-filing spouse
4.	\$ 4,788.33	\$ 3,066.77

5. List all payroll deductions:

- 5a. Tax, Medicare, and Social Security deductions
5b. Mandatory contributions for retirement plans
5c. Voluntary contributions for retirement plans
5d. Required repayments of retirement fund loans
5e. Insurance
5f. Domestic support obligations
5g. Union dues
5h. Other deductions. Specify: _____

5a.	\$ 1,273.00	\$ 633.17
5b.	\$ 0.00	\$ 0.00
5c.	\$ 0.00	\$ 21.67
5d.	\$ 0.00	\$ 81.25
5e.	\$ 145.51	\$ 173.33
5f.	\$ 0.00	\$ 0.00
5g.	\$ 19.54	\$ 54.00
5h.+	\$ 0.00	\$ 0.00

6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.

6.	\$ 1,438.05	\$ 963.42
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7. Calculate total monthly take-home pay. Subtract line 6 from line 4.

7.	\$ 3,350.28	\$ 2,103.35
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8. List all other income regularly received:

- 8a. Net income from rental property and from operating a business, profession, or farm
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.
8b. Interest and dividends
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.
8d. Unemployment compensation
8e. Social Security
8f. Other government assistance that you regularly receive
Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.
Specify: _____
8g. Pension or retirement income
8h. Other monthly income. Specify: _____

8a.	\$ 0.00	\$ 0.00
8b.	\$ 0.00	\$ 0.00
8c.	\$ 0.00	\$ 0.00
8d.	\$ 0.00	\$ 0.00
8e.	\$ 0.00	\$ 0.00
8f.	\$ 0.00	\$ 0.00
8g.	\$ 0.00	\$ 0.00
8h.+	\$ 0.00	\$ 0.00

9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.

9.	\$ 0.00	\$ 0.00
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10. Calculate monthly income. Add line 7 + line 9.

Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.

10.	\$ 3,350.28	+	\$ 2,103.35	=	\$ 5,453.63
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11. State all other regular contributions to the expenses that you list in Schedule J.

Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.

Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.

Specify: _____

11. +\$ **0.00**

12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the *Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data*, if it applies

12. \$ **5,453.63**

Combined monthly income

13. Do you expect an increase or decrease within the year after you file this form?

☒ No.

☐ Yes. Explain: _____